FEE CALCULATION SHEET  (FOR USE WITH FORM PTO-875)								10/565879 FILING DATE APPLICANT(S) SERIAL NO.  APPLICANT(S)						
	·	(FOR US	SE WITH	I FORM	PTO-875			CANT(S)				20		
	AS FILED		AFTER 1*AMENDMENT		APTER  1 MAMENDMENT		CLAIMS	AS F	AS FILED		AFTER		AFTER	
1	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	1"AME IND.	NDMENT	
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OTAL DEP.		-	15	<b>←</b>			TOTAL DEP.		<b>*</b>  -		<b>*</b>  -		♣	
OTAL LAIMS			17				TOTAL CLAIMS							
ro - 1360 (	(REV. 11/04)							U.S Pat	S. DEPARTM	ENT of COM	IMERCE			